

APPLICATION INFORMATION

Application number:: New
Filing Date::
Application Type:: Regular
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CR disks::
Number of copies of CDs::
Sequence submission?:: No
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: **ADJUVANT VIRAL PARTICLE**

Attorney Docket Number:: 15810-1US PM/MG/al
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 9
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?::
Petition Type::
Secrecy Order in Parent Appl.?:: No

INVENTOR INFORMATION

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given name:: Denis
Middle name::
Family name:: Leclerc
Name Suffix::
City of Residence:: Fossambault-sur-le-lac
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 8 rue des Sapins

City:: Fossambault-sur-le-lac
State or Province:: Québec

Country:: Canada
Postal or Zip Code:: G0A 3M0

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given name:: Nathalie
Middle name::
Family name:: Majeau
Name Suffix::
City of Residence:: Fossambault-sur-le-lac
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 8 rue des Sapins
City:: Fossambault-sur-le-lac
State or Province:: Québec
Country:: Canada
Postal or Zip Code:: G0A 3M0

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given name:: Philippe
Middle name::
Family name:: Tessier
Name Suffix::
City of Residence:: Cap-Rouge
State or Province of Residence:: Québec
Country of Residence:: Canada
Street:: 1056 de St-Sébastien
City:: Cap-Rouge
State or Province:: Québec
Country:: Canada
Postal or Zip Code:: G1Y 2S5

Inventor Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given name:: Constantino
Middle name::
Family name:: López-Macías
Name Suffix::
City of Residence:: México D.F.

State or Province of Residence::
Country of Residence:: Mexico
Street:: Ejército Nacional #14-103 Col. Anzures
City:: México D.F.
State or Province::
Country:: Mexico
Postal or Zip Code:: 11590

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 020988
Phone number:: (514) 845-7126
Fax:: (514) 288-8389
E-Mail Address:: swabey@ogilvyrenault.com

REPRESENTATIVE INFORMATION

Representative Customer Number:: 020988

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
			MM/DD/YY
			MM/DD/YY
			MM/DD/YY
			MM/DD/YY

FOREIGN PRIORITY INFORMATION

Country::	Application Number::	Filing Date::
United States	60/393,659	07/05/2002

ASSIGNEE INFORMATION

Assignee name::
Street::

City::
State or Province::
Country::
Postal or Zip Code::